



City of Mankato

ZONING REQUEST APPLICATION

10 Civic Center Plaza ~ PO Box 3368, Mankato, MN 56002-3368
Phone (507) 387-8620 FAX (507) 387-6845

For Office Use Only

File No.	Date	Existing Zoning	PIN
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Applicant Name: _____ Phone: (W) _____ (H) _____

Address: _____

Legal Description of Parcel: _____

Address of Property if Applicable: _____

- ☐ **CONDITIONAL USE PERMIT AND PLANNED UNIT DEVELOPMENT:** Include the items listed below.
- ☐ **VARIANCE:** Indicate variance requested and hardship making variance necessary. Also furnish a site plan on 8-1/2" x 11" paper showing size of lot, size of structure, and distance from lot lines. Site plan shall be drawn to a tenth scale (1:10, 1:20, etc.)
- ☐ **REZONING & ORDINANCE AMENDMENT:** Please contact the Planning & Zoning Administrator for submittal requirements.

Summary of Request - Attach additional sheets if necessary.

Signature of Applicant (property owner, _____)

- | | |
|---|---|
| <input type="checkbox"/> a. The location, dimensions, floor area, type of construction, and | <input type="checkbox"/> i. Use of location and dimensions of all structures for fire and emergency vehicles. |
| <input type="checkbox"/> b. Floor plan showing specific uses within the building. | <input type="checkbox"/> j. Statement of whether or not the building will be sprinkled and fire flow availability for the sprinkler system and fire hydrants. |
| <input type="checkbox"/> c. The number, the size and type of dwelling units in each building, and the overall dwelling unit density. | <input type="checkbox"/> k. The location, intensity and design of exterior lighting. |
| <input type="checkbox"/> d. The proposed treatment of open spaces and the exterior surfaces of all structures, with sketches of proposed landscaping and structures, including typical elevations. | <input type="checkbox"/> l. The location and purpose of any existing or proposed dedication or easement. |
| <input type="checkbox"/> e. Architectural graphics, including typical floor plans and elevations, profiles, and cross-sections. | <input type="checkbox"/> m. The general drainage plan for the development tract. |
| <input type="checkbox"/> f. The number, location, and dimensions of parking spaces and loading docks, with means of ingress and egress. | <input type="checkbox"/> n. The location and dimensions of adjacent properties, abutting public right-of-ways and easements on the property. |
| <input type="checkbox"/> g. The proposed traffic circulation pattern within the area of the development, including the location and description of public improvements to be installed, including any streets and access easements. | <input type="checkbox"/> o. Significant topographical or physical features of the site including existing trees. |
| <input type="checkbox"/> h. The location of all fire hydrants on the property and the location of all fire hydrants within one-hundred fifty (150) feet of the property. | <input type="checkbox"/> p. Wetland delineations for all wetlands on the site. |
| | <input type="checkbox"/> q. The location and proposed treatment of any historical structure or other historical design element or feature. |
| | <input type="checkbox"/> r. Utility service plans (water, sewer, storm). |
| | <input type="checkbox"/> s. Landscaping plans. |

Note: All plans shall be drawn to a tenth scale (1:10, 1:20, etc.)

Zoning Request Fee: Payable with Application (make check payable to City of Mankato):

☐ \$335 Conditional Use Permit ☐ \$335 Rezoning ☐ \$95 Variance for one- and two-family dwelling ☐ \$325 Variance (other uses)

Hearing Notice Fee: Payable Prior to Planning Commission/Administrative Hearing: _____ notices X \$2.00/notice = \$ _____.

Public hearing notices are billed to applicant and **must** be paid prior to the Planning Commission/Administrative Hearing.

Ltr Sent	STATUS OF REQUEST ACTIVITIES:	Planning Commission: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Tabled
<input type="checkbox"/>	Notification of Land Use Request	Comments on Action: _____
<input type="checkbox"/>	Billing for Notifications	City Council: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Tabled
<input type="checkbox"/>	Billing for Notices PAID	Comments on Action: _____
<input type="checkbox"/>	Planning Commission / <input type="checkbox"/> Administrative Hearing	_____
<input type="checkbox"/>	City Council Hearing	_____